



**Los Angeles County
Board of Supervisors**

Gloria Molina
First District

Mark Ridley-Thomas
Second District

Zev Yaroslavsky
Third District

Don Knabe
Fourth District

Michael D. Antonovich
Fifth District

Mitchell H. Katz, M.D.
Director

Hal F. Yee, Jr., M.D., Ph.D.
Chief Medical Officer

Christina Ghaly, M.D.
Deputy Director, Strategic Planning

313 N. Figueroa Street, Suite 912
Los Angeles, CA 90012

Tel: (213)240-8101
Fax: (213) 481-0503

www.dhs.lacounty.gov

*To ensure access to high-quality,
patient-centered, cost-effective health
care to Los Angeles County residents
through direct services at DHS facilities
and through collaboration with
community and university partners.*



www.dhs.lacounty.gov

June 10, 2014

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

**APPROVAL TO DELEGATE AUTHORITY TO ACCEPT ANTICIPATED
GRANT AWARD FROM THE HEALTH RESOURCES AND SERVICES
ADMINISTRATION AND AWARD A SOLE SOURCE AGREEMENT
(ALL SUPERVISORIAL DISTRICTS)
(3 VOTES)**

SUBJECT

Request delegated authority to accept an anticipated grant award from the Health Resources and Services Administration in an amount not to exceed \$1,500,000 and, contingent on receipt of the grant, execute a sole source Agreement with Patricia Dennehy Consulting Services to develop and execute a work plan to support the development of a sustainable inter-professional collaborative practice environment in the ambulatory care and nurse education systems of the Department of Health Services.

IT IS RECOMMENDED THAT THE BOARD:

1. Delegate authority to the Director of Health Services (Director), or his designee, to accept a three year grant for up to \$1,500,000 from the Health Resources and Services Administration (HRSA), for the period July 1, 2014 through June 30, 2017, and execute a grant agreement and any related HRSA grant documents, subject to review by County Counsel to develop and implement a sustainable Inter-Professional Collaborative Practice (IPCP) environment in the Ambulatory Care Network (ACN) and nurse education systems in the Department of Health Services (DHS).
2. Delegate authority to the Director, or his designee, to execute a sole source Agreement with Patricia Dennehy Consulting Services (PDCS), contingent

ADOPTED

BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

26 June 10, 2014

Sachi A. Hamai
SACHI A. HAMAI
EXECUTIVE OFFICER

upon receipt of the HRSA grant, effective upon execution through June 30, 2015, with two option years through June 30, 2017 with an estimated annual maximum amount of \$463,000, to develop and implement a project to create and foster an IPCP within the Patient Centered Medical Home (PCMH)-based teams at two ACN health centers initially, and eventually implement the project at ACN health centers Countywide.

3. Delegate authority to the Director, or his designee, to: (a) accept and execute any future amendments that HRSA requires as part of the grant award, including but not limited to any extension period, administrative changes or programmatic changes; and (b) amend the PDCS Agreement to extend the term for up to two years and increase the annual maximum accordingly, adjust the project allocation with no increase in maximum obligation, and incorporate non-material programmatic and/or administrative adjustments.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Anticipated HRSA Grant

DHS's Office of Nursing Affairs (ONA) recently applied for a \$1,500,000 grant from HRSA to set up a three year IPCP project to expand and improve the effectiveness of 27 IPCP teams and 350 nurses and other healthcare professionals at two sites in the DHS ACN. The grant application was submitted with PDCS as DHS' strategic partner. Approval of the first recommendation will authorize the Director, or his designee, to accept an anticipated three year HRSA grant in an amount not to exceed \$1,500,000.

Approval of the second recommendation will authorize the Director, or his designee, to execute a sole source agreement with PDCS, subject to award of the HRSA grant, to develop, implement, and evaluate the IPCP project.

Approval of the third recommendation will provide flexibility to DHS to execute future amendments to the HRSA grant award and/or PDCS Agreement to extend the term, and make any necessary contractual/programmatic and/or administrative adjustments to the project or the Agreement.

Project Background

The IPCP project calls for developing leadership, communication and collective decision-making that includes all team members of the ACN. Rather than the common top-down model, where all authority and decision-making emanates from the primary care providers, in an IPCP each member takes responsibility for leadership in the aspects of patient care that their role requires. DHS will also partner with the University of California, Los Angeles School of Nursing (UCLA) and California State University, Los Angeles School of Nursing (CSULA) to include all levels of nursing students on the PCMH teams as a clinical rotation. An IPCP fosters communication among health care providers as well as with patients, families, communities, and other health professionals in a responsive and responsible manner that supports a team approach to health maintenance and patient care. The primary long term goal of this project is to implement changes in the ACN's delivery of care that improves the quality of health care, while achieving cost effectiveness. In addition, this project will help DHS prepare for the expected increase in need for primary care access resulting from the implementation of the Affordable Care Act (ACA).

The project encompasses four core objectives:

Objective 1 – Expand and enhance the IPCP core competencies of PCMH-based team members within two clinics of the ACN network by creating an environment where all team members practice to the full extent of their competency and education.

Objective 2 – Increase the number of diverse emerging nurse leaders and nursing students skilled in IPCP by providing opportunities to practice inter-professional team-building, collaborative problem solving and care coordination in a safety net patient-centered care practice environment.

Objective 3 – Evaluate and improve patient health and clinical process outcomes through an IPCP team approach to an individual, panel and population-based care, based on best practice guidelines and clinical protocols/standardized procedures and collaboration with HRSA leadership.

Objective 4 – Create a strategic plan to spread the best practices of inter-professional collaborative innovations developed in this project.

PDCS Agreement

Pursuant to the recommended Agreement, Dr. Patricia Dennehy, the principal in PDCS will be the project director of the IPCP project and her firm will conduct the three project phases: planning and site assessment; implementation; and stabilization, as well as the project evaluation. PDCS has a well-established history in San Francisco of developing, implementing, and evaluating IPCP models, as well as conducting innovative clinical programs and educational opportunities for nursing students and disseminating the process, impact, and outcomes of care. PDCS was selected as the DHS strategic partner and named in the HRSA grant application based on the firm's expertise.

Implementation of Strategic Plan Goals

The recommended actions support Goal 1, Operation Effectiveness, of the County's Strategic Plan.

FISCAL IMPACT/FINANCING

The anticipated HRSA grant award to DHS is \$1,500,000 for a three year period. DHS will receive the amount of \$500,000 for each year of the grant period. The PDCS Agreement will have an estimated annual maximum amount of approximately \$463,000. The remaining \$37,000 will be used for incidental, administrative and other indirect costs

Funding will be requested in DHS FY 2014-15 Supplemental Budget Resolution and in future fiscal years, as needed.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The HRSA grant award documents will be reviewed by County Counsel. The Agreement with PDCS will have all standard County and DHS terms and conditions and will be reviewed and approved by County Counsel prior to execution. PDCS holds unique qualifications and expertise that the County cannot replicate on its own. Attachment A is the sole source checklist in compliance with Board Policy 5.100 for the sole source Agreement with PDCS.

This Agreement is not subject to Proposition A as services are needed on a temporary part-time and

intermittent basis and cannot currently be provided by County staff, and are not subject to the Living Wage Program (Los Angeles County Code Chapter 2.201).

CONTRACTING PROCESS

As part of the HRSA Grant application process, applicants were responsible for identifying all strategic partners at the time of application submission. ONA identified PDCS as its strategic partner and Project Director. Dr. Dennehy holds unique qualifications and expertise in the subject matter, having developed and successfully implemented a similar project in 2005 while working at Glide Health Services, a HRSA funded Nurse Managed Health Clinics. Since then, PDCS has been the recipient of numerous HRSA grants for the development of similar innovative clinical programs. HRSA evaluates grant submissions based on qualifications of applicants and their strategic partners, as well as appropriateness of project budget requests. Selection of PDCS as strategic partner is expected to be crucial to securing the grant and guaranteeing the success of the project.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommended action will enable DHS to expediently accept funding and implement this project that is intended to enforce inter-professional collaborative principles which will help accelerate the revolutionary growth of the PCMH at each participating site and throughout the ACN.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Mitchell Katz". The signature is fluid and cursive, with the first name "Mitchell" written in a larger, more prominent script than the last name "Katz".

Mitchell H. Katz, M.D.

Director

MHK:es

Enclosures

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors

ATTACHMENT A

SOLE SOURCE CHECKLIST FOR PATRICIA DENNEHY CONSULTING SERVICES

Check (√)	JUSTIFICATION FOR SOLE SOURCE CONTRACTS Identify applicable justification and provide documentation for each checked item.
	➤ Only one bona fide source for the service exists; performance and price competition are not available.
	➤ Quick action is required (emergency situation).
	➤ Proposals have been solicited but no satisfactory proposals were received.
	➤ Additional services are needed to complete an ongoing task and it would be prohibitively costly in time and money to seek a new service provider.
	➤ Maintenance service agreements exist on equipment which must be serviced by the authorized manufacturer's service representatives.
	➤ It is most cost-effective to obtain services by exercising an option under an existing contract.
	➤ It is in the best interest of the County e.g., administrative cost savings, excessive learning curve for a new service provider, etc.
X	➤ Other reason. Please explain: As part of the Health Resources and Services Administration (HRSA) Grant application process, applicants were responsible for identifying all strategic partners at the time of application submission. The Department of Health Services' (DHS) Office of Nursing Affairs (ONA) identified Patricia Dennehy Consulting Services (PDCS) as its strategic partner and Project Director. Dr. Dennehy holds unique qualifications and expertise in the subject matter, having developed and successfully implemented a similar project in 2005 while working at Glide Health Services, a HRSA funded Nurse Managed Health Clinics. Since then, PDCS has been the recipient of numerous HRSA grants for the development of similar innovative clinical programs. HRSA evaluates grant submissions based on qualifications of applicants and their

ATTACHMENT A

strategic partners, as well as appropriateness of project budget requests. Selection of PDCS as strategic partner is expected to be crucial to securing the grant and guaranteeing the success of the project.



Cluster Lead, CEO

5/29/14

Date